

## **Massachusetts Department of Environmental Protection**Bureau of Waste Prevention – Business Compliance Division

## **Air Operating Permit and Compliance Program**

**Application Activity Cover Sheet** 

Transmittal Number
SSEIS Number
FMF Number
SIC Code(s)

## Important: When filling out

forms on the computer, use only the tab key to move your cursor - do not use the return





Α.	Facility Information			
1.	Facility - the site or works at which the regulated activity occurs:			
	Name			
	Street Address			
	City	State	Zip Code	
2.	Mailing address:			
	Street/PO Box:	e-mail address (opti	onal)	
	City	State		
	Zip	Telephone Number		
	Facility Contact Person:	Contact person's title		
В.	Check One of the Following. Attac	h Supportii	ng Documentation	
	☐ Initial Operating Permit			
	Form BWP AQ 15, 16, 17 attached  Renewal of Existing Operating Permit			
	Form BWP AQ 12 attached  Significant Modification of Existing Operating Pe	ermit		
	Form BWP AQ 13 attached			
	OP Renewal (BWP AQ	12) attached		
	OP Renewal (BWP AQ	12) NOT attache	ed	
	☐ Minor Modification of Existing Operating Permit			
	Form BWP AQ 10 attached  Administrative Amendment of Existing Operatin	a Permit		
	Form BWP AQ 11 attached			
C.	Application Prepared By:			
Name (Print)		Phone Number		
Sigr	nature	Company (If Consul	ltant)	
Title	<u> </u>			